

PAPERWORK REDUCTION ACT SUBMISSION

Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the Supporting Statement and any additional documentation to: **Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW Washington, DC 20503.**

<p>1. Agency/Subagency originating request EPA, Office of Air and Radiation/Office of Transportation and Air Quality</p>	<p>2. OMB control number b. <input type="checkbox"/> None a_2060-0287 _ _ _ _ _</p>
<p>3. Type of information collection (<i>check one</i>)</p> <p>a. <input type="checkbox"/> New collection</p> <p>b. <input type="checkbox"/> Revision of a currently approved collection</p> <p>c. <input checked="" type="checkbox"/> Extension of a currently approved collection</p> <p>d. <input type="checkbox"/> Reinstatement, without change, of a previously approved collection for which approval has expired</p> <p>e. <input type="checkbox"/> Reinstatement, with change, of a previously approved collection for which approval has expired</p> <p>f. <input type="checkbox"/> Existing collection in use without an OMB control number</p> <p><i>For b-f, note item A2 of Supporting Statement Instructions</i></p>	<p>4. Type of review requested (<i>check one</i>)</p> <p>a. <input checked="" type="checkbox"/> Regular</p> <p>b. <input type="checkbox"/> Emergency - Approval requested by: <u> </u>/<u> </u>/<u> </u></p> <p>c. <input type="checkbox"/> Delegated</p> <p>5. Small entities Will this information collection have a significant economic impact on a substantial number of small entities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>6. Requested expiration date a. <input checked="" type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Other Specify: <u> </u>/<u> </u>/<u> </u></p>
<p>7. Title Emissions Certification and Compliance Requirements for Nonroad Compression-ignition Engines and On-highway Heavy Duty Engines (Renewal)</p>	
<p>8. Agency form number(s) (<i>If applicable</i>) 1684.06, Unnumbered Forms: Family Information, Test Information, Engine Model Summary, Part Number Summary, Technical Description, Large Engine Evaporative Emission</p>	
<p>9. Keywords Clean Air Act, Environmental Protection, Air Pollution Control</p>	
<p>10. Abstract: Engine manufacturers must obtain a certificate of compliance with applicable emission standards before the start of production. Manufacturers are required to submit a description of the engine families and emission test data to demonstrate compliance. The Averaging, Trading and Banking program allows manufacturers to earn emission credits on cleaner engine families and use them later to certify engine families with emission levels above the standards. The average emissions of all the manufacturer's engine families participating in the program must not exceed the standards. Respondents are also required to conduct quality control audits (PLT) and are subject to be audited by EPA (SEAs).</p>	
<p>11. Affected public (<i>Mark primary with "P" and all others that apply with "X"</i>)</p> <p>a. <u> </u> Individuals or households d. <u> </u> Farms</p> <p>b. <u>P</u> Business or other for-profit e. <u> </u> Federal Government</p> <p>c. <u> </u> Not-for-profit institutions f. <u> </u> State, Local or Tribal Government</p>	<p>12. Obligation to respond (<i>Mark primary with "P" and all others that apply with "X"</i>)</p> <p>a. <input checked="" type="checkbox"/> Voluntary</p> <p>b. <input type="checkbox"/> Required to obtain or retain benefits</p> <p>c. <input checked="" type="checkbox"/> Mandatory</p>
<p>13. Annual reporting and recordkeeping hour burden</p> <p>a. Number of respondents <u> </u> 68</p> <p>b. Total annual responses <u> </u> 1006</p> <p> 1. Percentage of these responses collected electronically <u> </u> 99 %</p> <p>c. Total hours requested <u> </u> 143,604</p> <p>d. Current OMB inventory <u> </u> 89,047</p> <p>e. Difference <u> </u> 54,557</p> <p>f. Explanation of difference</p> <p> 1. Program Change <u> </u> 0</p> <p> 2. Adjustment <u> </u> 54,557</p>	<p>14. Annual reporting and recordkeeping cost burden (<i>in thousands of dollars</i>)</p> <p>a. Total annualized capital/startup costs <u> </u> 0</p> <p>b. Total annual costs (O&M) <u> </u> 5,485</p> <p>c. Total annualized cost requested <u> </u> 5,485</p> <p>d. Current OMB inventory <u> </u> 4,089</p> <p>e. Difference <u> </u> 1,396</p> <p>f. Explanation of difference</p> <p> 1. Program change <u> </u> 0</p> <p> 2. Adjustment <u> </u> 1,396</p>
<p>15. Purpose of information collection (<i>Mark Primary With "P" and all others that apply with "X"</i>)</p> <p>a. <input checked="" type="checkbox"/> Application for benefits e. <input type="checkbox"/> Program planning or management</p> <p>b. <u> </u> Program evaluation f. <u> </u> Research</p> <p>c. <u> </u> General purpose statistics g. <input checked="" type="checkbox"/> Regulatory or compliance</p> <p>d. <u> </u> Audit</p>	<p>16. Frequency of recordkeeping or reporting (<i>check all that apply</i>)</p> <p>a. <input checked="" type="checkbox"/> Recordkeeping b. <input type="checkbox"/> Third party disclosure</p> <p>c. <input checked="" type="checkbox"/> Reporting</p> <p> 1. <input checked="" type="checkbox"/> On occasion 2. <input type="checkbox"/> Weekly 3. <input type="checkbox"/> Monthly</p> <p> 4. <input checked="" type="checkbox"/> Quarterly 5. <input type="checkbox"/> Semi-annually 6. <input checked="" type="checkbox"/> Annually</p> <p> 7. <input type="checkbox"/> Biannually 8. Other (describe) <u>There are recordkeeping requirements of up to eight years.</u></p>
<p>17. Statistical methods Does this information collection employ statistical methods? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Agency contact (<i>person who can best answer questions regarding the content of this submission</i>)</p> <p>Name: <u>Nydia Y. Reyes-Morales</u></p> <p>Phone: <u>202-343-9264</u></p>